

BEFORE THE
PHYSICIAN ASSISTANT BOARD
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation)
Against:)

Sean Thomas Lynch, P.A.)

Case No. 950-2019-002305

Physician Assistant)
License No. PA 20059)

Respondent)
_____)

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Physician Assistant Board, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on March 3, 2023.

IT IS SO ORDERED February 2, 2023

PHYSICIAN ASSISTANT BOARD

By: _____



Juan Armenta, President

1 ROB BONTA
Attorney General of California
2 MATTHEW M. DAVIS
Supervising Deputy Attorney General
3 LEANNA E. SHIELDS
Deputy Attorney General
4 State Bar No. 239872
600 West Broadway, Suite 1800
5 San Diego, CA 92101
P.O. Box 85266
6 San Diego, CA 92186-5266
Telephone: (619) 738-9401
7 Facsimile: (619) 645-2061

8 *Attorneys for Complainant*

10
11 **BEFORE THE**
PHYSICIAN ASSISTANT BOARD
DEPARTMENT OF CONSUMER AFFAIRS
12 **STATE OF CALIFORNIA**

13 In the Matter of the Accusation Against:

Case No. 950-2019-002305

14 **SEAN THOMAS LYNCH, P.A.**
10280 Holden Trails Road
15 Lakeside, CA 92040-2243

OAH No. 2022090631

16 **Physician Assistant License No. PA 20059,**

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

17 Respondent.

18
19 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
20 entitled proceedings that the following matters are true:

21 **PARTIES**

22 1. Rozana Khan (Complainant) is the Executive Officer of the Physician Assistant
23 Board (Board). She brought this action solely in her official capacity and is represented in this
24 matter by Rob Bonta, Attorney General of the State of California, by LeAnna E. Shields, Deputy
25 Attorney General.

26 2. Respondent Sean Thomas Lynch, P.A. (Respondent) is represented in this proceeding
27 by attorneys Scott Buchholz, Esq., Chris Freistedt, Esq., and Pari H. Granum, Esq., with Dummit,
28 Buchholz & Trapp, whose address is: 101 W. Broadway, Suite 1400, San Diego, CA 92101.

3. On or about November 4, 2008, the Board issued Physician Assistant License No. PA 20059 to Respondent. The Physician Assistant License was in full force and effect at all times relevant to the charges brought in Accusation No. 950-2019-002305, and will expire on April 30, 2024, unless renewed.

JURISDICTION

4. On or about June 17, 2022 Accusation No. 950-2019-002305 was filed before the Board, and is currently pending against Respondent. On or about June 17, 2022, the Accusation and all other statutorily required documents were properly served on Respondent. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A true and correct copy of Accusation No. 950-2019-002305 is attached as Exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and fully understands the charges and allegations in Accusation No. 950-2019-002305. Respondent has also carefully read, fully discussed with counsel, and fully understands the effects of this Stipulated Settlement and Disciplinary Order.

7. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

8. Having the benefit of counsel, Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

9. Respondent does not contest that, at an administrative hearing, Complainant could establish a *prima facie* case with respect to each and every charge and allegation contained in

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1 Accusation No. 950-2019-002305 and agrees that he has thereby subjected his Physician
2 Assistant License No. PA 20059 to disciplinary action.

3 10. Respondent agrees that if he ever petitions for early termination or modification of
4 probation, or if an accusation and/or petition to revoke probation is filed against him before the
5 Board, all of the charges and allegations in Accusation No. 950-2019-002305 shall be deemed
6 true, correct and fully admitted by Respondent for purposes of any such proceeding or any other
7 licensing proceeding involving Respondent in the State of California.

8 11. Respondent agrees that his Physician Assistant License No. PA 20059 is subject to
9 discipline and he agrees to be bound by the Board's probationary terms as set forth in the
10 Disciplinary Order below.

11 CONTINGENCY

12 12. This Stipulated Settlement and Disciplinary Order shall be subject to approval of the
13 Board. The parties agree that this Stipulated Settlement and Disciplinary Order shall be
14 submitted to the Board for its consideration in the above-entitled matter and, further, that the
15 Board shall have a reasonable period of time in which to consider and act on this Stipulated
16 Settlement and Disciplinary Order after receiving it. By signing this stipulation, Respondent
17 fully understands and agrees that he may not withdraw his agreement or seek to rescind this
18 stipulation prior to the time the Board considers and acts upon it.

19 13. The parties agree that this Stipulated Settlement and Disciplinary Order shall be null
20 and void and not binding upon the parties unless approved and adopted by the Board, except for
21 this paragraph, which shall remain in full force and effect. Respondent fully understands and
22 agrees that in deciding whether or not to approve and adopt this Stipulated Settlement and
23 Disciplinary Order, the Board may receive oral and written communications from its staff and/or
24 the Attorney General's Office. Communications pursuant to this paragraph shall not disqualify
25 the Board, any member thereof, and/or any other person from future participation in this or any
26 other matter affecting or involving Respondent. In the event that the Board does not, in its
27 discretion, approve and adopt this Stipulated Settlement and Disciplinary Order, with the
28 exception of this paragraph, it shall not become effective, shall be of no evidentiary value

1 whatsoever, and shall not be relied upon or introduced in any disciplinary action by either party
2 hereto. Respondent further agrees that should this Stipulated Settlement and Disciplinary Order
3 be rejected for any reason by the Board, Respondent will assert no claim that the Board, or any
4 member thereof, was prejudiced by its/his/her review, discussion and/or consideration of this
5 Stipulated Settlement and Disciplinary Order or of any matter or matters related hereto.

6 ADDITIONAL PROVISIONS

7 14. This Stipulated Settlement and Disciplinary Order is intended by the parties herein to
8 be an integrated writing representing the complete, final and exclusive embodiment of the
9 agreements of the parties in the above-entitled matter.

10 15. The parties agree that copies of this Stipulated Settlement and Disciplinary Order,
11 including copies of the signatures of the parties, may be used in lieu of original documents and
12 signatures and, further, that such copies shall have the same force and effect as originals.

13 16. In consideration of the foregoing admissions and stipulations, the parties agree that
14 the Board may, without further notice or formal proceeding, issue and enter the following
15 Disciplinary Order:

16 DISCIPLINARY ORDER

17 IT IS HEREBY ORDERED that Physician Assistant License No. PA 20059 issued to
18 Respondent Sean Thomas Lynch, P.A., is hereby revoked. However, the revocation is stayed and
19 Respondent is placed on probation for three (3) years on the following terms and conditions:

20 1. MEDICAL RECORD KEEPING COURSE Within 60 calendar days of the effective
21 date of this decision, Respondent shall enroll in a course in medical record keeping approved in
22 advance by the Board or its designee. The course shall be Category I certified, limited to
23 classroom, conference, or seminar settings. Respondent shall successfully complete the course
24 within the first 6 months of probation.

25 Respondent shall pay the cost of the course.

26 Respondent shall submit a certification of successful completion to the Board or its
27 designee within 15 days after completing the course.

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2. EDUCATION COURSE Within 60 days of the effective date of the decision, Respondent shall submit to the Board or its designee for its prior approval an educational program or course from an accredited program which shall not be less than 40 hours of Category 1 CME. The education course shall be aimed at correcting any areas of deficient practice or knowledge. The course shall be Category I certified, limited to classroom, conference, or seminar settings. Respondent shall successfully complete the course within the first year of probation.

Respondent shall pay the cost of the course.

Respondent shall submit a certification of successful completion to the Board or its designee within 15 days after completing the course.

3. CLINICAL TRAINING PROGRAM Within 60 days of the effective date of this decision, Respondent shall submit to the Board or its designee for prior approval, a clinical training or educational program such as the Physician Assessment and Clinical Education Program (PACE) offered by the University of California -- San Diego School of Medicine or equivalent program as approved by the Board or its designee. The exact number of hours and specific content of the program shall be determined by the Board or its designee. The program shall determine whether Respondent has successfully completed and passed the program.

Respondent shall pay the cost of the program.

If the program makes recommendations for the scope and length of any additional educational or clinical training, treatment for any medical or psychological condition, or anything else affecting Respondent's practice as a physician assistant, Respondent shall comply with the program recommendations and pay all associated costs.

Respondent shall successfully complete and pass the program not later than six months after Respondent's initial enrollment. The program determines whether or not the Respondent successfully completes the program.

If Respondent fails to either 1) complete the program within the designated time period, or 2) to pass the program, as determined by the program, Respondent shall cease practicing as a physician assistant immediately after being notified by the Board or its designee.

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1 4. MAINTENANCE OF PATIENT MEDICAL RECORDS

2 Respondent shall keep written medical records for each patient contact (including all visits
3 and phone calls) at the worksite and shall make them available for immediate inspection by the
4 Board or its designee on the premises at all times during business hours.

5 5. ON-SITE SUPERVISION

6 The supervising physician shall be on site at least 50% of the time Respondent is practicing.

7 6. APPROVAL OF SUPERVISING PHYSICIAN Within 30 days of the effective date
8 of this decision, Respondent shall submit to the Board or its designee for its prior approval the
9 name and license number of the supervising physician and a practice plan detailing the nature and
10 frequency of supervision to be provided. Respondent shall not practice until the supervising
11 physician and practice plan are approved by the Board or its designee.

12 Respondent shall have the supervising physician submit quarterly reports to the Board or its
13 designee.

14 If the supervising physician resigns or is no longer available, Respondent shall, within 15
15 days, submit the name and license number of a new supervising physician for approval.
16 Respondent shall not practice until a new supervising physician has been approved by the Board
17 or its designee.

18 7. NOTIFICATION OF EMPLOYER AND SUPERVISING PHYSICIAN

19 Respondent shall notify his current and any subsequent employer and supervising
20 physician(s) of the discipline and provide a copy of the Accusation, Decision, and Order to each
21 employer and supervising physician(s) during his period of probation, before accepting or
22 continuing employment. Respondent shall ensure that each employer informs the Board or its
23 designee, in writing within 30 days, verifying that the employer and supervising physician(s) have
24 received a copy of the Accusation, Decision, and Order.

25 This condition shall apply to any change(s) in place of employment.

26 The Respondent shall provide to the Board or its designee the names, physical addresses,
27 mailing addresses, and telephone numbers of all employers, supervising physicians, and work site

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1 monitor, and shall inform the Board or its designee in writing of the facility or facilities at which
2 the person practices as a physician assistant.

3 Respondent shall give specific, written consent to the Board or its designee to allow the
4 Board or its designee to communicate with the employer, supervising physician, or work site
5 monitor regarding the licensee's work status, performance, and monitoring.

6 8. OBEY ALL LAWS Respondent shall obey all federal, state, and local laws, and all
7 rules governing the practice of medicine as a physician assistant in California, and remain in full
8 compliance with any court ordered criminal probation, payments, and other orders.

9 9. QUARTERLY REPORTS Respondent shall submit quarterly declarations under
10 penalty of perjury on forms provided by the Board or its designee, stating whether there has been
11 compliance with all the conditions of probation.

12 10. OTHER PROBATION REQUIREMENTS Respondent shall comply with the
13 Board's probation unit. Respondent shall, at all times, keep the Board and probation unit
14 informed of Respondent's business and residence addresses. Changes of such addresses shall be
15 immediately communicated in writing to the Board and probation unit. Under no circumstances
16 shall a post office box serve as an address of record, except as allowed by California Code of
17 Regulations, title 16, section 1399.511.

18 Respondent shall appear in person for an initial probation interview with Board or its
19 designee within 90 days of the decision. Respondent shall attend the initial interview at a time
20 and place determined by the Board or its designee.

21 Respondent shall, at all times, maintain a current and renewed physician assistant license.

22 Respondent shall also immediately inform the probation unit, in writing, of any travel to
23 any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than
24 thirty (30) days.

25 11. INTERVIEW WITH MEDICAL CONSULTANT Respondent shall appear in
26 person for interviews with the Board's medical or expert physician assistant consultant upon
27 request at various intervals and with reasonable notice.

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1 12. NON-PRACTICE WHILE ON PROBATION Respondent shall notify the Board or
2 its designee in writing within 15 calendar days of any periods of non-practice lasting more than
3 30 calendar days. Non-practice is defined as any period of time exceeding 30 calendar days in
4 which Respondent is not practicing as a physician assistant. Respondent shall not return to
5 practice until the supervising physician is approved by the Board or its designee.

6 If, during probation, Respondent moves out of the jurisdiction of California to reside or
7 practice elsewhere, including federal facilities, Respondent is required to immediately notify the
8 Board in writing of the date of departure and the date of return, if any.

9 Practicing as a physician assistant in another state of the United States or federal
10 jurisdiction while on active probation with the physician assistant licensing authority of that state
11 or jurisdiction shall not be considered non-practice.

12 All time spent in a clinical training program that has been approved by the Board or its
13 designee, shall not be considered non-practice. Non-practice due to a Board ordered suspension
14 or in compliance with any other condition or probation, shall not be considered a period of non-
15 practice.

16 Any period of non-practice, as defined in this condition, will not apply to the reduction of
17 the probationary term.

18 Periods of non-practice do not relieve Respondent of the responsibility to comply with the
19 terms and conditions of probation.

20 It shall be considered a violation of probation if for a total of two years, Respondent fails to
21 practice as a physician assistant. Respondent shall not be considered in violation for non-practice
22 as long as Respondent is residing and practicing as a physician assistant in another state of the
23 United States and is on active probation with the physician assistant licensing authority of that
24 state, in which case the two year period shall begin on the date probation is completed or
25 terminated in that state.

26 13. UNANNOUNCED CLINICAL SITE VISIT The Board or its designee may make
27 unannounced clinical site visits at any time to ensure that Respondent is complying with all terms
28 and conditions of probation.

1 14. CONDITION FULFILLMENT A course, evaluation, or treatment completed after
2 the acts that gave rise to the charges in the accusation, but prior to the effective date of the
3 Decision may, in the sole discretion of the Board or its designee, be accepted towards the
4 fulfillment of the condition.

5 15. COMPLETION OF PROBATION Respondent shall comply with all financial
6 obligations (e.g., cost recovery, probation costs) no later than 60 calendar days prior to the
7 completion of probation. Upon successful completion of probation, Respondent's license will be
8 fully restored.

9 16. VIOLATION OF PROBATION If Respondent violates probation in any respect, the
10 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and
11 carry out the disciplinary order that was stayed. If an accusation or petition to revoke probation is
12 filed against Respondent during probation, the Board shall have continuing jurisdiction until the
13 matter is final, and the period of probation shall be extended until the matter is final.

14 17. COST RECOVERY The Respondent is hereby ordered to reimburse the Physician
15 Assistant Board the amount of \$14,933.00 within 90 days from the effective date of this decision
16 for its investigative and enforcement costs. Failure to reimburse the Board's costs for its
17 investigation and enforcement shall constitute a violation of the probation order. Alternately, the
18 Board agrees to payment by an installment plan, which Respondent will organize with his
19 probation monitor. The filing of bankruptcy by Respondent shall not relieve Respondent of his
20 responsibility to reimburse the Board for its investigative and enforcement costs.

21 18. PROBATION MONITORING COSTS Respondent shall pay the costs associated
22 with probation monitoring each and every year of probation, as designated by the Board, which
23 may be adjusted on an annual basis. The costs shall be made payable to the Physician Assistant
24 Board and delivered to the Board no later than January 31 of each calendar year.

25 19. VOLUNTARY LICENSE SURRENDER Following the effective date of this
26 probation, if Respondent ceases practicing due to retirement, health reasons, or is otherwise
27 unable to satisfy the terms and conditions of probation, Respondent may request, in writing, the
28 voluntarily surrender of Respondent's license to the Board. Respondent's written request to

1 surrender his license shall include the following: his name, license number, case number, address
2 of record, and an explanation of the reason(s) why Respondent seeks to surrender his license.
3 The Board reserves the right to evaluate the Respondent's request and to exercise its discretion
4 whether to grant the request, or to take any other action deemed appropriate and reasonable under
5 the circumstances. Respondent shall not be relieved of the requirements of his probation unless
6 the Board or its designee notifies Respondent in writing that Respondent's request to surrender
7 his license has been accepted. Upon formal acceptance of the surrender, Respondent shall, within
8 15 days, deliver Respondent's wallet and wall certificate to the Board or its designee and shall no
9 longer practice as a physician assistant. Respondent will no longer be subject to the terms and
10 conditions of probation and the surrender of Respondent's license shall be deemed disciplinary
11 action. If Respondent re-applies for a physician assistant license, the application shall be treated
12 as a petition for reinstatement of a revoked license.

13 20. FUTURE ADMISSIONS CLAUSE If Respondent should ever apply or reapply for
14 a new license or certification, or a petition for reinstatement of a license, by any other health care
15 licensing action agency in the State of California, all of the charges and allegations contained in
16 the Accusation No. 950-2019-002305 shall be deemed true, correct, and fully admitted by
17 Respondent for purposes of any Statement of Issues or any other proceeding seeking to deny or
18 restrict license.

19 ACCEPTANCE

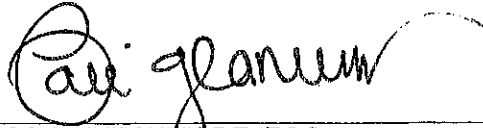
20 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
21 discussed it with my attorneys, Scott Buchholz, Esq., Chris Freistedt, Esq., and Pari H. Granum,
22 Esq. I fully understand the stipulation and the effect it will have on my Physician Assistant
23 License No. PA 20059. I enter into this Stipulated Settlement and Disciplinary Order voluntarily,
24 knowingly, and intelligently, and agree to be bound by the Decision and Order of the Physician
25 Assistant Board.

26
27 DATED: 1/4/2023


28 SEAN THOMAS LYNCH, P.A.
Respondent

1 I have read and fully discussed with Respondent Sean Thomas Lynch, P.A., the terms and
2 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
3 I approve its form and content.

4
5 DATED: 1/4/2023


SCOTT BUCHHEITZ, ESQ.
CHRIS FREISTEDT, ESQ.
PARI H. GRANUM, ESQ.
Attorneys for Respondent

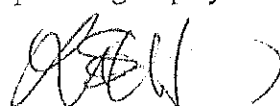
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9 ENDORSEMENT

10 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully
11 submitted for consideration by the Physician Assistant Board.

12 DATED: 1/4/2023

Respectfully submitted,

14 ROB BONTA
Attorney General of California
15 MATTHEW M. DAVIS
Supervising Deputy Attorney General

16 
17 LEANNA E. SHIELDS
18 Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 950-2019-002305

1 ROB BONTA
Attorney General of California
2 MATTHEW M. DAVIS
Supervising Deputy Attorney General
3 LEANNA E. SHIELDS
Deputy Attorney General
4 State Bar No. 239872
600 West Broadway, Suite 1800
5 San Diego, CA 92101
P.O. Box 85266
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Telephone: (619) 738-9401
7 Facsimile: (619) 645-2061

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BEFORE THE
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13 In the Matter of the Accusation Against:

Case No. 950-2019-002305

14 SEAN THOMAS LYNCH, P.A.
10280 Holden Trails Road
15 Lakeside, CA 92040-2243

ACCUSATION

16 Physician Assistant License No. PA 20059,
17 Respondent.
18

19
20 Complainant alleges:

21 PARTIES

22 1. Rozana Khan (Complainant) brings this Accusation solely in her official capacity as
23 the Executive Officer of the Physician Assistant Board, Department of Consumer Affairs (Board).

24 2. On or about November 4, 2008, the Physician Assistant Board issued Physician
25 Assistant License No. PA 20059 to Sean Thomas Lynch, P.A. (Respondent). The Physician
26 Assistant License No. PA 20059 was in full force and effect at all times relevant to the charges
27 brought herein and will expire on April 30, 2024, unless renewed.

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JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 3501 of the Code states, in pertinent part:

As used in this chapter:

(a) 'Board' means the Physician Assistant Board.

(b) 'Approved program' means a program for the education of physician assistants that has been formally approved by the board.

(c) 'Trainee' means a person who is currently enrolled in an approved program.

(d) 'Physician assistant' or 'PA' means a person who meets the requirements of this chapter and is licensed by the board.

(e) 'Supervising physician' or 'supervising physician and surgeon' means a physician and surgeon licensed by the Medical Board of California or by the Osteopathic Medical Board of California who supervises one or more physician assistants, who possesses a current valid license to practice medicine, and who is not currently on disciplinary probation for improper use of a physician assistant.

(f) (1) 'Supervision' means that a licensed physician and surgeon oversees the activities of, and accepts responsibility for, the medical services rendered by a physician assistant. Supervision, as defined by this subdivision, shall not be construed to require the physical presence of the physician and surgeon, but does require the following:

(A) Adherence to adequate supervision as agreed to in the practice agreement.

(B) The physician and surgeon being available by telephone or other electronic communication method at the time the PA examines the patient.

(2) Nothing in this subdivision shall be construed as prohibiting the board from requiring the physical presence of a physician and surgeon as a term or condition of a PA's reinstatement, probation, or imposing discipline.

(g) 'Regulations' means the rules and regulations as set forth in Chapter 13.8 (commencing with Section 1399.500) of Title 16 of the California Code of Regulations.

...

(k) 'Practice agreement' means the writing, developed through collaboration among one or more physicians and surgeons and one or more physician assistants, that defines the medical services the physician assistant is authorized to perform pursuant to Section 3502 and that grants approval for physicians and surgeons on the staff of an organized health care system to supervise one or more physician assistants in the organized health care system. Any reference to a delegation of services

1 agreement relating to physician assistants in any other law shall have the same
2 meaning as a practice agreement.

3 (l) 'Other specified medical services' means tests or examinations performed or
4 ordered by a physician assistant practicing in compliance with this chapter or
5 regulations of the Medical Board of California promulgated under this chapter.

6 5. Section 3502 of the Code states:

7 (a) Notwithstanding any other law, a PA may perform medical services as
8 authorized by this chapter if the following requirements are met:

9 (1) The PA renders the services under the supervision of a licensed physician
10 and surgeon who is not subject to a disciplinary condition imposed by the Medical
11 Board of California or by the Osteopathic Medical Board of California prohibiting
12 that supervision or prohibiting the employment of a physician assistant.

13 (2) The PA renders the services pursuant to a practice agreement that meets the
14 requirements of Section 3502.3.

15 (3) The PA is competent to perform the services.

16 (4) The PA's education, training, and experience have prepared the PA to
17 render the services.

18 (b) (1) Notwithstanding any other law, a physician assistant performing medical
19 services under the supervision of a physician and surgeon may assist a doctor of
20 podiatric medicine who is a partner, shareholder, or employee in the same medical
21 group as the supervising physician and surgeon. A physician assistant who assists a
22 doctor of podiatric medicine pursuant to this subdivision shall do so only according to
23 patient-specific orders from a supervising physician and surgeon.

24 (2) A supervising physician and surgeon shall be available to the physician
25 assistant for consultation when assistance is rendered pursuant to this subdivision. A
26 physician assistant assisting a doctor of podiatric medicine shall be limited to
27 performing those duties included within the scope of practice of a doctor of podiatric
28 medicine.

(c) Nothing in regulations shall require that a physician and surgeon review or
countersign a medical record of a patient treated by a physician assistant, unless
required by the practice agreement. The board may, as a condition of probation or
reinstatement of a licensee, require the review or countersignature of records of
patients treated by a physician assistant for a specified duration.

...

6. Section 3527 of the Code states:

(a) The board may order the denial of an application for, or the issuance subject
to terms and conditions of, or the suspension or revocation of, or the imposition of
probationary conditions upon a PA license after a hearing as required in Section 3528
for unprofessional conduct that includes, but is not limited to, a violation of this

chapter, a violation of the Medical Practice Act, or a violation of the regulations adopted by the board.

(d) The board may order the licensee to pay the costs of monitoring the probationary conditions imposed on the license.

(e) The expiration, cancellation, forfeiture, or suspension of a PA license by operation of law or by order or decision of the board or a court of law, the placement of a license on a retired status, or the voluntary surrender of a license by a licensee shall not deprive the board of jurisdiction to commence or proceed with any investigation of, or action or disciplinary proceeding against, the licensee or to render a decision suspending or revoking the license.

7. California Code of Regulations, title 16, section 1399.521 states:

In addition to the grounds set forth in section 3527, subd. (a), of the Code the board may deny, issue subject to terms and conditions, suspend, revoke or place on probation a physician assistant for the following causes:

(a) Any violation of the State Medical Practice Act which would constitute unprofessional conduct for a physician and surgeon.

8. Section 2227 of the Code states:

(a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provisions of this chapter:

(1) Have his or her license revoked upon order of the board.

(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.

(3) Be placed on probation and be required to pay the costs of probation monitoring upon order of the board.

(4) Be publicly reprimanded by the board. The public reprimand may include a requirement that the licensee complete relevant educational courses approved by the board.

(5) Have any other action taken in relation to discipline as part of an order of probation, as the board or an administrative law judge may deem proper.

(b) Any matter heard pursuant to subdivision (a), except for warning letters, medical review or advisory conferences, professional competency examinations, continuing education activities, and cost reimbursement associated therewith that are agreed to with the board and successfully completed by the licensee, or other matters

1 made confidential or privileged by existing law, is deemed public, and shall be made
2 available to the public by the board pursuant to Section 803.1.

3 9. Section 2234 of the Code states, in pertinent part:

4 The board shall take action against any licensee who is charged with
5 unprofessional conduct. In addition to other provisions of this article, unprofessional
conduct includes, but is not limited to, the following:

6 (a) Violating or attempting to violate, directly or indirectly, assisting in or
7 abetting the violation of, or conspiring to violate any provision of this chapter.

8 (b) Gross negligence.

9 (c) Repeated negligent acts. To be repeated, there must be two or more
10 negligent acts or omissions. An initial negligent act or omission followed by a
separate and distinct departure from the applicable standard of care shall constitute
repeated negligent acts.

11 (1) An initial negligent diagnosis followed by an act or omission medically
12 appropriate for that negligent diagnosis of the patient shall constitute a single
negligent act.

13 (2) When the standard of care requires a change in the diagnosis, act, or
14 omission that constitutes the negligent act described in paragraph (1), including, but
not limited to, a reevaluation of the diagnosis or a change in treatment, and the
15 licensee's conduct departs from the applicable standard of care, each departure
constitutes a separate and distinct breach of the standard of care.

16 ...

17 10. Section 2266 of the Code states:

18 The failure of a physician and surgeon to maintain adequate and accurate
19 records relating to the provision of services to their patients constitutes unprofessional
conduct.

20 COST RECOVERY

21 11. Section 125.3 of the Code provides, in pertinent part, that the Board may request the
22 administrative law judge to direct a licentiate found to have committed a violation or violations of
23 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and
24 enforcement of the case, with failure of the licentiate to comply subjecting the license to not being
25 renewed or reinstated. If a case settles, recovery of investigation and enforcement costs may be
26 included in a stipulated settlement.

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1 FACTUAL ALLEGATIONS

2 Patient A¹

3 12. On or about August 3, 2018, Patient A, a then 60-year-old female, presented with
4 complaints of a sore throat for two (2) weeks and dark red brown vaginal discharge for (1) day.

5 13. According to records, Respondent performed an evaluation of Patient A, including a
6 pap smear and ordering a urine analysis. During the pap smear, Respondent noted a small
7 amount of blood on the speculum. Respondent then assessed Patient A with vaginal discharge,
8 hematuria,² dysuria,³ and sore throat. According to records, Respondent advised Patient A to
9 follow up, as needed.

10 14. According to records, Respondent did not order a gynecologic evaluation or any
11 further testing until requested by Patient A's primary care physician.

12 15. On or about July 20, 2021, Respondent attended a subject interview with Board
13 investigators. During the interview, Respondent agreed vaginal bleeding for a post-menopausal
14 female requires additional consideration, as compared to vaginal discharge.

15 Patient B

16 16. On or about October 11, 2018, Patient B, a then 46-year-old male, presented with
17 several complaints, including, but not limited to, complaints of muscle and joint pain for
18 approximately three (3) weeks and blood in his stool for approximately one (1) month.

19 17. According to records, Respondent performed an evaluation of Patient B and assessed
20 Patient B with chronic joint and muscle aches and diabetes.

21 18. According to records, Respondent did not perform an abdominal exam, anal exam, or
22 rectal exam of Patient B.

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25 ¹ For patient privacy purposes, patients' true names are not used in the instant Accusation to
26 maintain patient confidentiality. The patients' identities are known to Respondent or will be disclosed to
Respondent upon receipt of a duly issued request for discovery and in accordance with Government Code
section 11507.6.

27 ² Hematuria indicates the presence of blood in urine.

28 ³ Dysuria indicates pain or burning sensation during urination.

1 19. According to records, Respondent did not refer Patient B to gastroenterology or order
2 an endoscopy or colonoscopy to determine a definitive diagnosis.

3 20. According to records, Respondent did not note any necessary follow up for Patient B,
4 only indicating, follow up, as needed.

5 21. On or about October 12, 2018, according to records, Respondent informed Patient B
6 that he had ordered a stool test for blood.

7 22. On or about July 20, 2021, Respondent attended a subject interview with Board
8 investigators. During the interview, Respondent stated Patient B refused a physical examination
9 of his abdomen and digital rectal examination. Respondent admitted this information was not
10 documented in Patient B's records.

11 Patient C

12 23. On or about December 21, 2018, Patient C, a then 48-year-old male, presented with
13 complaints of insomnia. According to records, Patient C indicated he had not slept in three (3)
14 days and felt nausea and restlessness. Patient C also indicated having a problem with alcohol and
15 stated he had been drinking alcohol "too much and too long." Patient C also requested assistance
16 to stop his drinking.

17 24. According to records, Respondent performed an evaluation of Patient C and noted
18 Patient C exhibited, among other things, elevated blood pressure, elevated heart rate, and an
19 abnormal EKG, specifically, tachycardia and right axis deviation.

20 25. According to records, Respondent diagnosed Patient C with, among other things,
21 alcoholism, elevated blood pressure, tachycardia, and insomnia. Respondent's treatment plan for
22 Patient C was to begin a blood pressure medication and follow up with his primary care physician
23 the following week. According to records, Respondent also provided Patient C with contact
24 information for two alcohol treatment centers.

25 26. According to records, Respondent failed to investigate the causes of Patient C's
26 elevated blood pressure.

27 27. According to records, Respondent failed to treat Patient C's elevated blood pressure
28 with lifestyle modifications and two blood pressure medications.

1 28. According to records, Respondent failed to document what blood pressure medication
2 was prescribed to Patient C, including the dose and/or frequency.

3 Patient D

4 29. On or about November 14, 2018, Patient D, a then 39-year-old male, presented with
5 complaints of rectum discomfort and pressure for approximately one (1) week and frequent
6 urination.

7 30. According to records, Respondent performed an evaluation of Patient D and noted
8 moderate blood on a urine dip. Respondent diagnosed Patient D with rectal pain, urinary
9 frequency, and hematuria. According to records, Respondent ordered a complete urine analysis, a
10 urine culture, and a prostate-specific antigen. Respondent also ordered a blood count and
11 metabolic panel which revealed Patient D had elevated calcium levels.

12 31. According to records, Respondent inserted a notation in Patient D's lab results
13 indicating the metabolic panel results were normal.

14 32. According to records, Respondent did not communicate the elevated calcium level to
15 Patient D or his primary care physician.

16 33. On or about February 8, 2022, Respondent attended a subject interview with Board
17 investigators. During the interview, Respondent stated he verbally communicated the elevated
18 calcium level to Patient D's primary care physician, but did not document this in Patient D's
19 records.

20 Patient E

21 34. On or about September 7, 2017, Patient E, a then 59-year-old female, presented with
22 complaints of pain in her left foot for approximately one (1) month.

23 35. According to records, Respondent performed an evaluation of Patient E and noted
24 Patient E expressed feeling pain with palpation across her metatarsal heads and the hallux
25 metatarsophalangeal joint. Respondent diagnosed Patient E with foot pain, pain in the left
26 forefoot and toes. Respondent's treatment plan for Patient E included an order for a uric acid test
27 and instructions to ice her foot and wear a stiff soled boot when using a shovel in her garden.
28 According to records, Respondent also noted X-rays and follow up, as needed.

1 36. According to records, Respondent did not order any additional imaging or refer
2 Patient E to podiatry or orthopedics.

3 FIRST CAUSE FOR DISCIPLINE

4 (Gross Negligence)

5 37. Respondent has subjected his Physician Assistant License No. PA 20059 to
6 disciplinary action under sections 3527, subdivision (a), and 2234, of the Code, and the California
7 Code of Regulations, title 16, section 1399.521, subdivision (a), as defined by section 2234,
8 subdivision (b), of the Code, in that he committed gross negligence in his care and treatment of
9 Patient A which included, but was not limited to, the following:

10 (a) Paragraphs 12 through 15, above, are hereby incorporated by reference and
11 realligned as if fully set forth herein; and

12 (b) Respondent failed to order a gynecologic evaluation or any further testing
13 for Patient A, until requested by Patient A's primary care physician.

14 SECOND CAUSE FOR DISCIPLINE

15 (Repeated Negligent Acts)

16 38. Respondent has further subjected his Physician Assistant License No. PA 20059 to
17 disciplinary action under sections 3527, subdivision (a), and 2234, of the Code, and the California
18 Code of Regulations, title 16, section 1399.521, subdivision (a), as defined by section 2234,
19 subdivision (c), of the Code, in that he committed repeated negligent acts in his care and
20 treatment of Patients A, B, C, D, and E, which included, but was not limited to, the following:

21 39. Respondent committed repeated negligent acts in his care and treatment of Patient A,
22 which included, but was not limited to, the following:

23 (a) Paragraphs 12 through 15, and 37, above, are hereby incorporated by
24 reference and realigned as if fully set forth herein;

25 (b) Respondent failed to order a gynecologic evaluation or any further testing
26 for Patient A, until requested by Patient A's primary care physician;

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1 (c) Respondent failed to accurately document Patient A's presenting issue as
2 postmenopausal vaginal bleeding, instead documenting Patient A's condition as
3 vaginal discharge; and

4 (d) Respondent failed to recommend additional follow up medical care, instead
5 only documenting "follow up, as needed."

6 40. Respondent committed repeated negligent acts in his care and treatment of Patient B,
7 which included, but was not limited to, the following:

8 (a) Paragraphs 16 through 22, above, are hereby incorporated by reference and
9 realleged as if fully set forth herein;

10 (b) Respondent failed to perform an abdominal exam, an anal exam, or a rectal
11 exam with an anoscopy, and Respondent failed to document that Patient B
12 refused to allow Respondent to perform a digital rectal exam; and

13 (c) Respondent failed to document any further necessary follow up medical
14 care, instead only documenting "follow up, as needed."

15 41. Respondent committed repeated negligent acts in his care and treatment of Patient C,
16 which included, but was not limited to, the following:

17 (a) Paragraphs 23 through 28, above, are hereby incorporated by reference and
18 realleged as if fully set forth herein; and

19 (b) Respondent failed to properly manage Patient C's presenting conditions, in
20 that Respondent failed to fully investigate the cause of Patient C's elevated
21 blood pressure; Respondent failed to consider acute alcohol withdrawal as a
22 possible source for Patient C's other presenting conditions; Respondent failed
23 to evaluate and/or document an evaluation to determine the presence and/or
24 absence of tremor and shortness of breath; Respondent failed to recommend
25 lifestyle modifications and two medications for high blood pressure; and
26 Respondent failed to document what medication was prescribed to Patient C
27 and the instructions for this prescription.

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42. Respondent committed repeated negligent acts in his care and treatment of Patient D, which included, but was not limited to, the following:

(a) Paragraphs 29 through 33, above, are hereby incorporated by reference and realleged as if fully set forth herein; and

(b) Respondent failed to order the appropriate follow up medical care as indicated by Patient D's elevated calcium levels and communicated to Patient D that his lab results were normal, despite the elevated calcium levels.

43. Respondent committed repeated negligent acts in his care and treatment of Patient E, which included, but was not limited to, the following:

(a) Paragraphs 34 through 36, above, are hereby incorporated by reference and realleged as if fully set forth herein; and

(b) Respondent failed to properly manage Patient E's presenting conditions, in that Respondent failed to order any additional imaging to determine the severity of Patient E's injury; Respondent failed to refer Patient E to orthopedics or podiatry for an expedited consultation; and Respondent failed to make orders to provide for full immobilization of Patient E's foot.

THIRD CAUSE FOR DISCIPLINE

(Failure to maintain adequate and accurate records)

44. Respondent has further subjected his Physician Assistant License No. PA 20059 to disciplinary action under sections 3527, subdivision (a), and 2234, of the Code, and the California Code of Regulations, title 16, section 1399.521, subdivision (a), as defined by section 2266, of the Code, in that Respondent failed to maintain adequate and accurate records regarding his care and treatment of Patients A, B, C, D, and E, as more particularly alleged in paragraphs 12 through 43, above, which are hereby incorporated by reference and realleged as if fully set forth herein.

FOURTH CAUSE FOR DISCIPLINE

(Violations of Provisions of the Medical Practice Act)

45. Respondent has further subjected his Physician Assistant License No. PA 20059 to disciplinary action under sections 3527, subdivision (a), and 2234, of the Code, and the California

1 Code of Regulations, title 16, section 1399.521, subdivision (a), as defined by section 2234,
2 subdivision (a), of the Code, in that Respondent violated provisions of the Medical Practice Act in
3 his care and treatment of Patients A, B, C, D, and E, as more particularly alleged in paragraphs 12
4 through 44, above, which are hereby incorporated by reference and realleged as if fully set forth
5 herein.

6 PRAYER

7 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
8 and that following the hearing, the Physician Assistant Board issue a decision:

9 1. Revoking or suspending Physician Assistant License No. PA 20059, issued to
10 Respondent Sean Thomas Lynch, P.A.;

11 2. Ordering Respondent Sean Thomas Lynch, P.A., to pay the Physician Assistant
12 Board the reasonable costs of the investigation and enforcement of this case, and if placed on
13 probation, to pay the Board the costs of probation monitoring; and

14 3. Taking such other and further action as deemed necessary and proper.

15
16 DATED: June 17, 2022

Kristy Voong for
ROZANA KHAN
Executive Officer
Physician Assistant Board
Department of Consumer Affairs
State of California
Complainant

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